

CLAIMS ONLY					
Application Number 10 635224					
Filing Date					
Applicant(s)					
* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT
	Indep	Depend	Indep	Depend	Indep Depend
1					
2					
3					
4					
5					
6					
7					
8					
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47					
48					
49					
50					
Total Indep	3				
Total Depend	8				
Total Claims	11				
* May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep Depend
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100					
Total Indep					
Total Depend					
Total Claims					